

# UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 20003 0067

First Inventor Raymond Poyner

Title PEEN CONDITIONING OF TITANIUM METAL WOOD GOLF CLUB HEADS

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Express Mail Label No.

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17) (duplicate)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 13]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the invention
  - Brief Summary of the invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 2]
5. Oath or Declaration [Total Pages 2]
  - a. ☐ Newly executed (original or copy)
  - b. ☒ Copy from a prior application (37 CFR 1.63 (d))  
(for a continuation/divisional with Box 18 completed)
  - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATIONS PARTS

9. ☒ Assignment Papers from prior appl. No. 09/882,259
10. ☐ 37 C.F.R. §3.73(b) Statement (when there is an assignee)
  - ☒ Revocation and Power of Attorney from prior appl. No. 09/882,259
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☒ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP §03)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP)

of prior application No. 09 / 882,259

Prior application information: Examiner Thanh P. Duong

Group / Art Unit 3711

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

23517

☒ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

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Name (Print/Type)	Stephanie D. Scruggs	Registration No. (Attorney/Agent)	54,432
Signature	<i>Stephanie D. Scruggs</i>	Date	September 10, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

03945 U.S. PTO  
10/658365  
09/10/03

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003 Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p style="text-align: center; font-weight: bold; font-size: small;">Complete If Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>To Be Assigned</td></tr> <tr><td>Filing Date</td><td>Concurrently Herewith</td></tr> <tr><td>First Named Inventor</td><td>R. POYNOR</td></tr> <tr><td>Examiner Name</td><td>To Be Assigned</td></tr> <tr><td>Group / Art Unit</td><td>To Be Assigned</td></tr> <tr><td>Attorney Docket No.</td><td>20003.0067</td></tr> </table>		Application Number	To Be Assigned	Filing Date	Concurrently Herewith	First Named Inventor	R. POYNOR	Examiner Name	To Be Assigned	Group / Art Unit	To Be Assigned	Attorney Docket No.	20003.0067
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<b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>790</b>															

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																																																																																																																																															
<p><input type="checkbox"/> Check   <input type="checkbox"/> Credit card   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other   <input type="checkbox"/> None</p> <p><input checked="" type="checkbox"/> Deposit Account:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;">Deposit Account Number</td> <td style="width: 50%; border-bottom: 1px solid black;">19-5127</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Deposit Account Name</td> <td style="border-bottom: 1px solid black;">Swidler Berlin Sheroff Friedman, LLP</td> </tr> </table> <p>The Commissioner is authorized to: (check all that apply)</p> <p><input checked="" type="checkbox"/> Charge fee(s) indicated below   <input checked="" type="checkbox"/> Credit any overpayments</p> <p><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>				Deposit Account Number	19-5127	Deposit Account Name	Swidler Berlin Sheroff Friedman, LLP	<p><b>3. 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\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Stephanie D. Scroggs	Registration No. Attorney/Agent	54,432	Telephone	(202) 424-7755
Signature				Date	September 10, 2003

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